Lancashire County Council

Cabinet Committee on Performance Improvement

Tuesday, 7th March, 2017 at 9.00 am in Cabinet Room 'B' - The Diamond Jubilee Room, County Hall, Preston

Agenda

Part I (Open to Press and Public)

No.   Item

1.   Apologies for Absence

2.   Disclosure of Pecuniary and Non-Pecuniary Interests

Members are asked to consider any Pecuniary and Non-Pecuniary Interests they may have to disclose to the meeting in relation to matters under consideration on the Agenda.

3.   Minutes of the Meeting held on 5 December 2016   (Pages 1 - 6)

4.   Customer Access Performance Report   (Pages 7 - 18)
Presented by: Sarah Jenkins

5.   Risk Register Quarter 4 Report   (Pages 19 - 32)
Presented by: Paul Bond

6.   Quarterly Performance Summary Report   (Pages 33 - 44)
Presented by: Donna Talbot

7.   Urgent Business

An item of Urgent Business may only be considered under this heading where, by reason of special circumstances to be recorded in the minutes, the Chairman of the meeting is of the opinion that the item should be considered at the meeting as a matter of urgency. Wherever possible, the Chief Executive should be given advance warning of any Members' intention to raise a matter under this heading.

8.   Date of Next Meeting

27 June 2017 at 2pm, Cabinet Room B, County Hall, Preston

Lancashire
County
Council

I Young
Director of Governance,
Finance and Public Services

County Hall
Preston

Lancashire County Council

Cabinet Committee on Performance Improvement

Minutes of the Meeting held on Monday, 5th December, 2016 at 2.00 pm in Cabinet Room 'B' - The Diamond Jubilee Room, County Hall, Preston

Present:

County Councillor Jennifer Mein (Chair)

County Councillors

D Borrow   G Driver
B Winlow

1.   **Apologies for Absence**

There were no apologies for absence received.

The following speakers were welcomed to the meeting:
Angela Esslinger – Complaints Manager
Sakthi Karunanithi – Director for Public Health and Wellbeing
Jackie Brindle – Safer Travel Manager
Chief Inspector Damian Kitchen – Lancashire Constabulary
Rhiannon Leeds – Lancashire Partnership for Road Safety Coordinator
Paul Bond – Head of Service Legal and Democratic Services
Donna Talbot – Head of Service Business Intelligence
Richard Cooke – Health, Equity and Welfare Partnerships Manager

2.   **Disclosure of Pecuniary and Non-Pecuniary Interests**

None.

3.   **Minutes of the Meeting held on 25 October 2016**

Members attention was drawn to the BTLS Staff Engagement Survey circulated with the minutes.

Resolved: That;
  i.   The minutes of the meeting held on the 25 October 2016 be confirmed and signed by the Chair.
  ii.   The BTLS Staff Engagement Survey – August/September 2016 Results circulated with the minutes be noted.

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4.   Annual Statutory Report for Social Care Complaints and Customer Feedback

Angela Esslinger, Complaints Manager, provided members with a summary of the report circulated with the agenda.

It was reported that overall, complaints form 1% of both adults and children's social care cases with an open referral in 2015/16. Members were advised that complaints have risen across both adults and children's social care although it could be attributed to a number of areas such as:

- Overall activity levels which have risen with assessments.
- Ongoing financial complaints such as duplicate billing, incorrect invoicing etc. It was confirmed that there is currently a drive to reduce this but due to the nature of these type of complaints relating to a system, it was acknowledged that these issues could not be resolved quickly.

In addition, it was reported that systems now in place make it much easier for complaints to be made although it was highlighted that this can add value to services by ensuring the learning is ongoing and is embedded.

For children's social care, it was reported that the overall rise could also be attributed to an increase in non-statutory CYP complaints.

It was highlighted to members that in adult's social care, there has been a rise in compliments. The most significant increase for compliments has been around equipment and adaptions.

Members were invited to comment on the information presented and a summary is provided below:

A query was raised in relation to the rise of complaints for assessments. Members were advised that a number of complaints related to either non-eligibility or to the assessment process. It was highlighted that assessments were always subject to complaints by their nature and a potential negative outcome for the recipient (or family of the recipient).

Members emphasised the need to focus on areas that have higher numbers of complaints and where data shows that no significant change has been made.

A query was raised in relation to the fostering and adoption complaints. It was confirmed that there were no specific themes to the complaints and these form of complaints were very individual in nature.

Resolved: That the report be received and acknowledged.

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5.   Child Road Safety in Lancashire

Sakthi Karunanithi, Director for Public Health and Wellbeing, CI Damian Kitchen, Lancashire Constabulary and Rhiannon Leeds, Lancashire Partnership for Road Safety Coordinator presented the report which provided an overview of children killed or seriously Injured (KSI) in Lancashire in the last five years and the actions aimed at reducing child casualties in Lancashire and proposals for future improvement.

It was reported that although there continued to be a declining trend nationally, Lancashire was showing an increase. The following information was highlighted to members:

- Peak hours for reported incidents were identified to be between the hours of 3-5pm for older children and 4-6pm for younger children.
- Education packages were confirmed to be in the process of review to ensure they are accurately targeted.
- Focus was required on secondary schools and were working on engagement.
- Data has shown that between June 2015 and July 2016, 66 out of the 79 incidents reported were not in vehicles and in addition 50% of those were in the 11-15 year old age group. From this, it was confirmed that 11-15 year olds age range should be a priority target area.

Members were invited to comment on the information presented and a summary is provided below:

A general discussion was held around the 20mph speed limit areas in relation to data on child KSI and speed enforcement. It was confirmed that police can enforce in a 20mph area although as a result of the reduction in resources, there has been a need to measure this requirement against other demands.

In relation to areas with dense housing with high numbers of children, it was confirmed that there would be a focus on these areas and at a smaller geographical footprint to identify where support can be given.

Members queried the causes around why the trend in Lancashire is different to nationally, and it was felt that there was a need to identify this as a priority to ensure that measures introduced would be effective. It was agreed that a further report could be brought back to the Committee on this. In addition, it was requested that comparators with our closest neighbouring authorities be included in the report.

Resolved: That;
   i.   The report and actions undertaken be noted.
   ii.   Further report be provided to the Committee after Easter (potentially 27 June meeting).

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6. Risk and Opportunity Register Quarter 3

Paul Bond, Head of Service Legal and Democratic Services, provided an update to members on the Risk and Opportunity Register Quarter 3 report circulated with the agenda which highlighted the issues which remain on the register as a result of the residual risk score.

It was reported that there have been no additions or deletions and that the report will also be presented to the Audit and Governance Committee at the end of January.

Resolved: That the report be noted.

7. Quarterly Corporate Performance Monitoring Report - Quarter 2 2016/17

Donna Talbot, Head of Service Business Intelligence, presented information from the Quarter 2 Corporate Performance Monitoring report circulated with the agenda which included a post Ofsted inspection update (attached as Appendix A).

A number of areas were highlighted to the Committee from the performance summary against the themes of Start Well, Live Well and Age Well.

It was reported that from the information on the Highlight Reports – Quarter 2 performance with regards to the City Deal, the reported £124k investment of private sector capital by the end of quarter 2 was now over £1m. In addition, the six month trajectory value of £2.3m was being reviewed it light of more recent local contextual information and data - as it was seen as high.

Members were invited to comment on the information presented and a summary is provided below:

In relation to the data presented on social worker caseloads, a suggestion was made as to whether further assessment was required to ensure that not only the number but the complexity of cases was clearly identified to ensure appropriate distribution.

It was confirmed that in relation to the mandatory training for children's social care staff, the 9% of staff who have not yet accessed the training will be targeted to complete the LCS eLearning.

A query was raised in relation to the data on Lancashire Care Homes and the decline in nursing care as a result of a number of homes removing this service. It was agreed that further information would be provided to members.

Richard Cooke, Health, Equity and Welfare Partnerships Manager presented information from Appendix A of the report on the Ofsted Post Inspection update.

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Members were advised that 57 newly qualified social workers have been recruited as a result of the successful recruitment campaign.

The Skylakes arrangement was reported to end in January. It was anticipated that there would be an initial rise in caseload numbers but plans were confirmed to be in place to ensure children's social care were prepared.

It was confirmed that the next Ofsted monitoring visit will be 11 and 12 January 2017.

A query was raised in relation to the recent incentive offer of £500 to recommend a friend who has over 12 months qualified social work experience. It was confirmed that this was from a suggestion which came to the Children's Social Care Post Inspection Improvement Board and was a scheme used in other parts of the country to help support the recruitment drive for more experienced social workers.

Resolved: That the report and comments be noted.

8.   Urgent Business

There were no items of urgent business.

9.   Date of Next Meeting

It was noted that the next meeting of the Committee would be held on Tuesday 7 March 2017 at 9am, Cabinet Room B, County Hall.

I Young
Director of Governance, Finance and Public Services

County Hall
Preston

Cabinet Committee on Performance Improvement
Meeting to be held on 7 March 2017

Electoral Division affected:
All

Customer Access Performance Report

Contact for further information:
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Executive Summary

This report provides an update for the Cabinet Committee on Performance Improvement on the operation and performance of the Customer Access Service.

Recommendation

The Cabinet Committee on Performance Improvement are asked to comment on and note the contents of this report.

Background and Advice

Customer Access Service (CAS) is the first point of contact for 60% of all incoming telephony and email enquiries to Lancashire County Council. Our Service strategic plan has been for additional services to be delivered by CAS in order to better serve the citizens of Lancashire whilst improving costs and efficiency. The service is structured and divided into two distinct operational areas:

1. Within the dedicated **Social Care Centre** a highly specialised and sensitive service is delivered, offering information, advice and assistance on all matters relating to Adult & Children's Social Care. Requests ranging from simple ones such as meals on wheels applications are processed all the way through to handling more complex child and adult contacts.

2. Within the **Customer Contact Centre** twenty six services are delivered including: Highways, Ask HR, Libraries, NoWcard Concessionary Travel, Registration, Certificates, Waste, and Welfare Rights. Alongside these also sits a signposting service to direct customers to other agencies across the public sector, district councils and partner organisations.

The following table illustrates the volume of contacts presented for all services delivered through the Customer Access Service, April to December 2016, along with comparisons with the corresponding period from the previous year.

Lancashire
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Customer Access Service Performance - Up to the end of Quarter 3

	2015/16	2016/17
Telephone Calls Offered	723,793	743,914
Telephone Calls Answered	683,197	665,032
% Answered	94.4%	89.4%
emails Received	128,464	139,316
emails Completed	129,463	139,986
% Completed	100.8%[1]	100.5%[1]
Total Contacts Received	**852,257**	**883,906**

[1] *This figure is over 100% due to a small carry-over of emails from the previous year.*

From the above table the overall % of calls answered has reduced by 5%. This does not mean that 5% of the calls were never answered, these callers abandoned after their initial call attempt either on hearing the welcome messages acknowledging that they have dialled the wrong number. Other customers will abandon their initial call choosing not to wait and re-try later.

The above table also illustrates an overall reduction in calls answered and an increase in emails processed, this is as a result of ongoing vacancies reducing the resource to answer calls, and also the increase in emails received in Social Care. These emails are mainly from professionals and at times need follow up telephone calls or emails to progress which requires more resource than dealing with a telephone call, CAS are working closely with both Children's and Adults Social Care to consider more effective and structured professional referral processes.

Both operational areas have a requirement for staff to handle all manner of requests of varying complexities and as such a comprehensive training programme is in place supported by a commitment to their ongoing professional development. This in turn supports the delivery of a high quality service to customers to meet and hopefully exceed their expectations.

Customer Service Advisors (CSAs) are supported by a dedicated training team who provide bespoke training packages for each of the services provided.

We continually measure performance so that:
- We can tell that enquiries are handled without undue delay. This is as a result of the accurate forecasting of call volumes by 15 minute interval by day. We then compare the forecast to the actual performance.
- Customer experience is assessed, analysing data from our customer satisfaction surveys, and services re-engineered to deliver the optimum experience.
- Regular communication and feedback from senior managers is taken on board. We meet periodically with Heads of Service to discuss the specific service needs.

Performance, Transformation & Improvement

The service is actively involved with delivering requirements to support the following work areas within the above programme:

Adult & Children's Social Care

Since April 2016 CAS have resolved **74.90%** of Adult Social Care contacts and **71.99%** of Children's Social Care contacts, an increase in both areas from the previous year.

Area	2015 - 2016	2016 - 2017	Increase
Adult Social Care	69.63%	74.90%	+5.27%
Children's Social Care	68.08%	71.99%	+3.91%

Contacts handled by CAS for Social Care have increased overall, with a reduction in telephone calls and an increase in email referrals.

- April to Decembers **2016** – **76,714** contacts relating to **Children**
- April to December 2015 – 70,968 contacts relating to Children

- April to December **2016** – **136,787** contacts relating to **Adults**
- April to December 2015 – 131,121 contacts relating to Adults

There has been continued successful engagement with both Social Care services to ensure that the volume of **non-complex** work resolved by CAS at first point of contact has increased whilst still ensuring the delivery of a **safe**, effective service.

There has been close integration with Adult Social Care on the **Passport to Independence** project managed by **Newton Europe.** Customer Access participated in a 'sandbox' or trial process over several months to test and develop more effective, streamlined processes. This will enable **amendments to care packages** and commissioning of **respite** to be undertaken at first point of contact.

CAS have also worked closely with Children's Social Care, building a **standard referral tool** as well as engaging with partner agencies to implement **new referral procedures**. The referral arrangements have been changed to take account of the introduction of the 'risk sensible' approach supported by the Lancashire Safeguarding Children's Board and Ofsted.

Blue Badge Service

Improvements in application processing time, waiting times and the **87% uptake** of the Blue Badge online application system continues to be sustained in CAS. CAS have met with elected members in this period to discuss how the Blue Badge scheme is being operated.

The **average approval rate** of Blue Badge applications is **88%.**

- **£178,060** of **income** has been generated from the introduction of the £10 charge for Blue Badges, since 1 March 2016 and up to 31 December 2016, this income recovers approximately 58% of the annual cost of administering the Blue Badge scheme.

Payment Method	Number	(£)	(%)
Online (Card)	13,963	139,630	78.4
Telephone (Card)	3,388	33,880	19.0
Cheque	439	4,390	2.5
Postal Order	18	180	0.1
Cash	11	110	-
Refunds	-13	-130	-
TOTAL	**17,806**	**178,060**	**100.0**

97.4% of all payments made to the Blue Badge Service have been **card payments** made **online (78.4%)** or over **the telephone (19.0%)**.

The Blue Badge Service continues to offer a **fast track application process** for terminally ill Blue Badge applicants (also known as palliative care applications). This fast track process includes:

- Applications being made on behalf of terminally ill customers, for example, by Macmillan Nurses and Hospice staff using a simple emailed form.
- Terminally ill applicants are not required to complete the usual online application form or submit any additional documentary evidence themselves.
- Palliative care applications do not require a photograph to be submitted.
- These applications are processed by the Blue Badge Service within 24 hours of receipt.
- A priority postal service is used to ensure customers receive their badge in the post as soon as possible.
- The £10 Blue Badge being waived for badges issued under the palliative care criteria.

Crisis Support

The **administrative and financial delivery of the Crisis Support scheme** was **transferred into the CAS in January 2017**. This replaced the Care and Urgent Needs scheme (CAUNSS) that had been in place since April 2013 and for which CAS have delivered first point of contact telephony for the service throughout this time.

To support the transition, the CSAs receiving telephone calls at the first point of contact have been trained on declining and signposting applications in specific circumstances where the basic criteria for the service is not met.

Applications received and assessed by the back office team has seen a **39.71% decrease**. This is because CSAs at the first point of contact are managing applications more effectively, declining those that do not meet the basic criteria. Where appropriate customers declined are signposted to other more relevant services that may be able to offer the support they have requested, for example the Wellbeing Service.

The **percentage of refusals and awards overall has remained static** between January 2016 and January 2017. This suggests that refusals at the first point of contact are consistent and accurate with decision making that is being made at the back office. It also suggests that those customers who most need it are receiving support.

Emergency Planning - Exercise Kingfisher

CAS took part in Exercise Kingfisher, a multi-agency exercise to test the emergency plan for Heysham Power Station on 17 January 2017. The role of CAS in the exercise was to develop and communicate the tactical response to the emergency along with colleagues from Health, Safety and Resilience, Children's Services, Adult Services and Communications. To replicate the service which CAS would provide in an emergency, Customer Access involved staff based at Lancashire House – from Corporate Contact Centre, Social Care and Information and Training in the exercise and they responded with likely scenarios based on their knowledge and experience of customers and the services we deliver. The exercise is executed in a way to replicate a real scenario, which is the CSAs receive random calls with no prior briefing. The CAS Information Manager liaises in real time with a corresponding Emergency Planning Officer, updating the responses for the CSAs and also informing the Emergency Planning team of the queries and concerns being raised by members of the public, which in turn informs some of the tactical response.

Genesys New Technology – Phase 1

Genesys is the new telephony, workforce planning, social media, and contact automation toolkit procured for the authority in December 2015. The first phase of the New Technology project was implemented in **September 2016** and has delivered a suite of new systems to support improved:

- Handling of customer contact by telephone and email
- Work force management for forecasting, resourcing and scheduling
- Reporting and Management Information

The LCC Accounts Payable and Procurement Services are also using the system to manage their customer contact by telephone as are the Local Pension Partnership and BTLS ICT Services. The snagging period of this phase is drawing to a close and work has commenced by BTLS to develop the detailed scope proposal for the second phase of the project.

The project delivery to date has been challenging, the program of work had been impacted by initial delays in hardware being delivered. Also some technical issues regarding specific elements of the software implementation. CAS have committed significant resource to resolve the issues as they presented themselves. CA have also insisted from both BTLS and the vendor, that moving forward lessons learnt in phase 1 inform the approach for delivery in phase 2.

Online Booking Notification of Marriage

The Registration Service launched a new online Notice of Marriage booking form on 5 December 2016. This online form **allows customers to book their Notice of Marriage appointment and pay the fee online**. This is now also used by CAS to process bookings over the telephone. Prior to this, Notice of Marriage appointments had to be booked by customers over the telephone or in person.

62% of Notice of Marriage appointments have been booked by customers using the **online self-service** option:

Source of booking	No.	(%)
Self Service	546	62
CAS	241	27
Other	100	11
TOTAL	**887**	**100**

11% of Notice of Marriage appointments booked since the online booking form went live have been booked **by the Registration Service**. Prior to 05 December 2016**, 100%** of Notice of Marriage appointments were made by back office staff in the Registration Service.

Property Asset Management System (PAMS)

CAS continue to play an active role in monitoring the experience of customers, suppliers and other LCC service areas following the implementation of PAMS. CAS are presented with approximately **660 calls** per week regarding property management and building faults across Lancashire. These calls are presented by schools, residential care homes, and other Authority maintained buildings. CAS determine at the first point whether the fault is an emergency against agreed criteria. Contacts meeting the emergency criteria result in a call as well as a system request to a contractor with the appropriately skilled workforce, for example a residential care home where the heating has failed, or a school with a building defect that impacts on the safety of the children and staff.

Lancashire Parking Service (LPS)

In January Lancashire Parking Services requested telephony support from CAS to help deal with an increase in call volumes they were experiencing due to the new **Fishergate Central Gateway Project**. CAS were able to design and implement new Interactive Voice Response (IVR) software build through the Genesys telephony platform, improving the customer experience and directing call volumes to the appropriate channels.
Three options were added to the IVR:

Option1   Automated payment line, removing the necessity for customers to speak to a CSA.
Option 2   Fishergate project, these calls are presented to CAS.
       A detailed message regarding the Fishergate project has been added here prior to connecting to CAS, this is to encourage self-service by

directing customers to the website, however still connecting through to CAS once the message is played for those customers who wish to speak to an advisor.

Option3 Resident parking permits and all other enquiries (Route to LPS).
A resident parking permit message has been added to play here advising customers they can apply for permits online, the call then connects to LPS.

Since the new IVR was launched on the 18 January 2017, CAS have handled **190 calls** relating the Fishergate project. In addition **464 callers** have chosen to select the automated payment line a service not offered previously. Prior to this calls would have been presented to an advisor working in the LPS team.

To give some context to the increase in calls as a result of the Fishergate project, LPS prior to this were offered on average, **330 calls per week**. Following the changes to traffic management in Fishergate this rose to an average weekly figure of **610 calls per week**. The busiest week was week commencing 21/11/2016 and **1,181 calls** were received. Since the second week in January the volumes of calls are reducing.

De-commissioning of 0800 and 0845 telephone numbers

The overall take up of the **0300 lines** has steadily increased over the period April to December **2016,** and was on average **92.1%,** the detail of which, is show below.

	Number dialling 0845	Number dialling 0300	Total	% 0300 Uptake
Apr-16	8,032	69,353	77,385	89.6
May-16	7,905	72,736	80,641	90.2
Jun-16	8,054	78,143	86,197	90.7
Jul-16	7,397	92,764	100,161	92.6
Aug-16	7,537	76,480	84,017	91
Sep-16	6,571	69,806	76,377	91.4
Oct-16	4,662	81,326	85,988	94.6
Nov-16	4,254	76,682	80,936	94.7
Dec-16	3,591	60,158	63,749	94.4

Automated Surveys

Customers are offered the opportunity to complete a survey based upon their perception and opinion of the service they experience during their contact with the council. This provides an unbiased gauge and view of the service we deliver.

In the period April to December 2016, **26,844** surveys were completed. The tables following provide the detail along with the percentage of calls which were **resolved at first point of contact from a customer perspective.**

Customer Satisfaction

Target of Calls Resolved at the First Point of Contact - Apr to Dec 2016	Percentage of Calls Resolved at the First Point of Contact Apr to Dec 2016	Surveys Completed - Apr to Dec 2016
Customer Contact Centre and AskHR combined		
90%	91.6%	14,688
Social Care		
83%	84.5%	12,156

Compliments and Complaints

The number of overall **compliments** the Customer Access Service has received so far during 2016/2017 is **32**. The number of **complaints** received so far during 2016/2017 is **41** out of a total number of **883,906** contacts received.

April to December 2016

		Apr-Jun	Jul-Sept	Oct-Dec	TOTAL
Social Care	Complaints	1	2	1	**4**
	Compliments	2	6	8	**16**
Customer Contact Centre	Complaints	9	17	9	**35**
	Compliments	3	5	4	**12**
HR	Complaints	2	0	0	**2**
	Compliments	1	2	1	**4**

April to December 2015

		Apr-Jun	Jul-Sept	Oct-Dec	TOTAL
Social Care	Complaints	10	8	8	**26**
	Compliments	5	6	10	**21**
Customer Contact Centre	Complaints	11	17	8	**36**
	Compliments	2	8	5	**15**
HR	Complaints	1	3	3	**7**
	Compliments	21	14	7	**42**

Performance 2016/2017

Telephony – April to December 2016

	Offered	Answered	% Answered	% SLA
Overall	743,914	665,032	89.4%	n/a
Social Care	299,681	257,248	85.8%	87.5%
Customer Contact	380,359	348,813	91.7%	90%
HR	63,874	58,971	92.3%	95%

Telephony – October to December 2016

	Offered	Answered	% Answered	% SLA
Overall	231,638	211,358	91.2%	n/a
Social Care	96,649	82,716	85.6%	87.5%
Customer Contact	115,017	109,583	95.3%	90%
HR	19,972	19,059	95.4%	95%

Email - up to and including Quarter 3

	Received	Completed	% Answered
Overall	139,316	139,986	100.5%[1]
Social Care	67,073	66,783	99.6%[1]
Customer Contact	39,540	40,214	101.7%[1]
HR	32,703	32,989	100.9%[1]

[1] *This figure is over 100% due to a small carry-over of emails from the previous year.*

Email - Quarter 3

	Received	Completed	% Answered
Overall	47,510	47,868	100.8%
Social Care	23,128	23,386	101.1%[1]
Customer Contact	13,918	13,853	99.5%
HR	10,464	10,629	101.6%[1]

[1] *This figure is over 100% due to a small carry-over of emails from the previous period.*

Future Improvements

Highways Asset Management System (HAMS)

CAS are the first point of contact for **Lancashire Highways and Countryside services**. The service is currently in the process of implementing their new asset management system HAMS. CAS have been heavily involved in the implementation to ensure the transition from the current system to HAMS is seamless with minimal impact to service delivery.

All **User Acceptance Testing has been completed and any defects identified have been resolved**, performance testing is due to take place from Lancashire House which will ensure the system is compatible with other CAS applications and systems and that response times are acceptable.

The system implementation has been an opportunity for CAS to review current business processes and streamline these where possible to realise benefits and efficiencies. As a result of the implementation CAS will:

- **Resolve more enquiries at first point of contact** using information available in the system and information resources.
- **Reduce call handling** times by:
  - Maximising the workflow functionality to escalate urgent enquiries reducing the need to make calls to Area offices.
  - Using functionality to handle from customers and decommission additional processes.

The operational go-live date is planned for early March 2017, CAS are finalising the training programme and scheduling for delivery to circa 60 advisors. Early indications are that the new system and toolkit will enhance both the customer and staff experience.

MASH

CAS are actively involved in the **MASH steering group**, redesigning the front door for the multi-agency safeguarding hub.

This has incorporated **internal process reviews** within Children's Social Care and Lancashire Constabulary as well as researching working practises in other authorities. Following a set of agreed design principles, the MASH structure will be developed over the next six months to reduce **duplication**, streamline processes and create a **safer**, more effective **information sharing** environment.

Customer Access Service Plan and Vision

The 2017/18 service plan will support a customer focused approach to service delivery contributing to and enabling the authority's **Digital Strategy.** It will also demonstrate the CAS contribution and commitment to the council's key Customer Access objectives, of **increasing** and **improving** 'access channel change', **reducing** the cost of service delivery by **promoting self-service and automation** for specific services and ensuring that the services provided keep the citizens of Lancashire at the core of what we do. However, customers will not be excluded because they do not have internet access at home. Where appropriate, our most vulnerable citizens will have telephone access to CSAs who understand specific services areas.

Genesys New technology – Phase 2

CAS and BTLS are working on the detailed scope proposal for the second phase of the project which will look to deliver:

- New customer contact channels for:
  - Web Chat
  - Social Media
- Telephony 'Auto attendant' to enable an element of speech direction for some calls
- Integration with Skype telephony

New Education Management System Project

The CAS Change team have attended **workshops** for the Education Management System Review. This review will re-implement the system used to handle school admissions (Impulse).

CAS are providing input with regards to **analysing customer journeys** through the admissions process and will be working with ICTS, Core Systems and Pupil Access teams to identify opportunities to **reduce the volume of telephony contacts** being handled by back office staff and **review the scope** of the telephony support service currently offered by CAS for online school admissions.

Most of the parents and guardians applying for schools places in Lancashire apply on line **(95 %+).** Moving forward it is proposed that this system will pull together all services linked with starting school and moving schools, for example transport and benefits, providing parents and guardians with one point of access for all schools associated services.

Recruitment

CAS are working closely with the authority's **HR and Learning and Development** managers, to react positively to the ongoing challenges around recruitment and retention. Work has also commenced with partners in the Job Centre Plus and **Lancashire Adult Learning**. Specifically looking at employability schemes that prepare people not in a work environment for some time to become job ready, focusing on IT and customer service skills. Customer Access will present to some of the

colleges and other further education institutes, an overview of working for Lancashire County Council's Customer Access Service, giving an overview of the benefits of a career path in customer services.

Consultations

Internal/external customers and service areas, including CAS, HR and Pensions staff.

Implications:

This item has the following implications, as indicated:

Risk management

This report is for noting and therefore a risk analysis in relation to the content on this report has not been required.

Financial Implications

There are no financial implications arising from this report.

Local Government (Access to Information) Act 1985
List of Background Papers

Paper	Date	Contact/Directorate/Tel
Nil		

Reason for inclusion in Part II, if appropriate

N/A.

Cabinet Committee on Performance Improvement
Meeting to be held on Tuesday, 7 March 2017

Report of the Head of Legal & Democratic Services

Electoral Division affected:
(All Divisions);

Risk and Opportunity Register (Quarter 4)
(Appendix "A" refers)

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Executive Summary

This report provides an updated (Quarter 4) Risk and Opportunity Register for the Committee to consider and comment upon.

Recommendation
The Committee are asked to note the updated Risk and Opportunity Register at Appendix A.

Background and Advice

Following the corporate approach to reporting on risk and opportunity the Quarter 4 Risk and Opportunity Register was recently reported to Management Team. Following this Committee, the register will be presented to Audit & Governance Committee on 3 April 2017. An updated Risk and Opportunity Register is attached at Appendix A and the Committee is asked to comment upon it.

The key highlights in the register include:

- for this quarter there is one addition (CR27) and one deletion (CR15) to the register;

- allowing for mitigating actions, the residual risk score for the following entries remain 12 or above so the issue remains on the register:

Lancashire
County
Council

Risk Identification Number (RIN)	Risk Description
CR1	Failure to implement the county council's Medium Term Financial Strategy (MTFS). Further mitigating actions added but residual risk score remains unchanged.
CR2	Risk to the on-going financial viability of the county council. Further mitigating actions added but residual risk score remains unchanged.
CR4	Delivering Organisational Transformation. Residual risk score remains unchanged.
CR5	Inability to adequately protect and safeguard children. Further mitigating actions added. Direction of travel updated.
CR6	Failure to comply with statutory requirements and duties relating to Children Looked After (CLA), children in need and children leaving care. Further mitigating actions added. Direction of travel updated.
CR7	Failure to recruit and retain experienced staff within Children's services. Direction of travel updated
CR8	Reputational damage and risk of direct intervention by Department for Education (DfE). Direction of travel updated.
CR12	Inability to implement/maintain systems that produce effective management information. Further mitigating actions added but residual score remains the same.
CR16	Management of the County Council's assets. Further mitigating actions added but residual score remains the same.
CR20	Transforming care (Winterbourne). Residual score remains at 12.
CR21	Service user/customer risk associated with the inability to influence behaviour change in demand and expectations continue to rise. Residual score remains at 12.
CR24	Failure to achieve targets with National Troubled Families Unit. Updated and residual risk score has increased.
CR25	Failure to implement and meet the statutory requirement to children and young people with special educational needs and/or disabilities remains unchanged.
CR26	Proposed museums closures. Further mitigating actions added but residual score remains the same.
CR27	The mobilisation of the home care framework and subsequent service transfer process. Mitigating actions are being put in place but the residual score means the issue is added to the register.
CO1	Developing a new model for public service delivery in Lancashire. Further updates added.
CO2	Delivering economic growth. Further maximising actions added.
CO3	Opportunities through delivering the corporate strategy and property strategy. No change.
CO4	Health & Social Care Integration. No change.

Implications:

This item has the following implications, as indicated:

Risk management

Good governance enables an authority to pursue its vision effectively as well as underpinning that vision with sound arrangements for control and management of risk. An Authority must ensure that it has a sound system of internal control which includes effective arrangements for the management of risk. Failure to develop and maintain a Corporate Risk & Opportunity Register means the County Council would be negligent in its responsibilities for ensuring accountability and the proper conduct of public business.

List of Background Papers

Paper   Date   Contact/Tel

NA

Reason for inclusion in Part II, if appropriate

NA

Appendix A: Corporate Risk & Opportunity Register Q4 2016/17

Risk Identification Number (RIN)	Risk Description	Risk Type	Possible Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
CR1	Failure to implement fully the councils medium term financial strategy including the delivery of planned budget reductions	Economic	Financial Savings not achieved resulting in in-year overspends with pressure on following year budget and reserves depleted more quickly than planned. Reductions in service and/or drop in quality of delivery leading to JR and damage to Council's reputation. New legislative requirements not being met and uncertainty over being able to deliver and/or implement future large projects. Potential for infrastructure to deteriorate.	• Monthly budget monitoring processes for Heads of Service and Directors with particular focus on agreed savings delivery. • Ensure key programmes of activity (particularly linked to savings / downsizing) are adequately resourced. • Quarterly Money Matters budget monitoring reports, MTFS, reserves and Treasury Management reports presented to members (includes capital). • Management Team actions to monitor key areas of expenditure and consider remedial courses of action to address budgetary pressures. • Robust Medium Term Financial Strategy and Plan, updated to reflect variations to resource and demand assumptions. Reserves regularly monitored and reviewed. • Resources allocated to Base Budget Review. Rebalance budget savings via an ongoing risk assessment.	25	• Recommendations from Zero Based Budget Review agree by Full Council on 9th February 2017. • Improve commercial and financial acumen. • Continuously revalidate budget assumptions. • PWC interim draft report 'Lancashire Public Service Delivery Model' presented to Political Governance Working Group and then full Council on 23rd February to allow time for reflection. The Political Governance Working Group will undertake a detailed review of the report after the elections. • Development of response to the Treasury and DCLG regarding the implementation of business rate retention and future needs assessment/allocation formula • Communicating with stakeholders to ensure an understanding of the councils financial position and need for change • Communicating specific proposals and service developments in the context of the financial scenario • Programme Office supporting services to deliver savings and bring forward savings wherever possible	16	Section 151 Officer	As time progresses the risk to some extent reduces. However, the risk cannot be fully mitigated until all the necessary enabling decisions have been taken and the relevant budget options have been realised.
CR2	Risk to the ongoing longer-term Financial Viability of the County Council	Economic/ Political/Social	Problems stored up for the future as a combination of delivery issues in CR1 and further national funding reductions causing minimum reserve position not to be maintained with the risk of not being able to set a balanced legal budget in future years.	• Base Budget Review has identified the risk of the County Council not being able to meet statutory obligations by 2018/19. The actual timing of when this situation may occur will be identified from the various monitoring and review process outlined in CR1 above	25	• Risk of the county council not being able to meet its statutory obligations by 2018/19 validated by PWC Zero Based Review activity (focus on lower quartile) will determine the scope for additional savings in all remaining services within the County Council (ongoing). • Links to Combined Authority work including Healthier Lancashire programme with the NHS as to any opportunities / additional pressures (ongoing). Lobbying – Treasury and DCLG by utilising ongoing existing networks MP's / Members, LGA, CCN, SCT (ongoing) • Development of response to the Treasury and DCLG of future needs assessment/allocation formula. • Communicating with stakeholders to ensure an understanding of the councils financial position and need for change • Communicating specific proposals and service	25	MT	Level

						developments in the context of the financial scenario				
CR4	Delivering organisational transformation including capacity and resilience	Organisational	The failure to clearly implement the draft corporate strategy that sets out our vision, aims and priorities could result in a lack of purpose, direction and have an impact on service delivery and produce an adverse external audit report. The new structure that seeks to provide the ability to join up our services in a new way may not be fit for purpose. Ineffective employee engagement and buy in. A fall in staff morale could increase sickness absence and stress. Loss of knowledge and skills due to turnover puts demand on remaining staff which can expose the council to key person dependency and the risk of poor resilience.	• The draft corporate strategy has now been amended to reflect the consultation outcomes and has been to full council. • The draft corporate strategy is being used to inform the development of the property review and proposed neighbourhood plans. • As part of the base budget review process options for service delivery and redesign have been developed including proposals to stop some services. • Management Team approval of all new appointments and cessation of temporary staff contracts. • Senior Management Development programme implemented. • Positive employee communication and engagement. • Wellbeing initiatives and support for managers and employees. • Introduced a new scheme of delegation for heads of service.	16	• The draft corporate strategy has been amended to reflect the consultation outcomes and subject to amendment approved by full council. This process is on-going. • Interim structures to reflect the base budget review options are being developed and implemented. • Property strategy and accommodation review being progressed and approach to neighbourhood plan being developed. • Independent challenge • See specific actions in relation to other risk entries i.e. Ofsted inspection • Use of transformation reserves to fund temporary staffing • Implementation of recruitment and retention strategies • Defining new service models across the organisation • Adults service transformation – recruitment of temporary staff • Children's service transformation – pilot programme in Fylde & Wyre • Extensive information is made available through the councils website which is also used by the customer service centre as a core council information resource • Promoting recognition and benefits of working at the council	12	MT	Level
CR5	Failure to adequately protect and safeguard children	Social	Children are put at risk of harm.	• MASH hub. • Serious incident reporting. • Quarterly safeguarding report, to include LSCB. • SCR learning shared. • Case file audits. • Multi-agency inspections. • Supervision with HOS. • Performance Data	25	• Post Improvement Inspection Board with Independent Chair appointed. • LSCB membership of Improvement Board and acting as critical friend. • Post Inspection Improvement Plan. • Review of all CiN cases using internal and external capacity. • Social Work Recruitment Strategy. • Peer Challenge. • Audit exercise. • Newton's review of pathways. • Established new QA system and implementation of Risk Sensible Model. Development of CIN Teams. • LSCB have established new QA system including multi-agency case file audits. • Monthly compliance recording of Strategy Discussions. • Strengthened quality assurance role of Independent Reviewing Officers. • Management Team approval of 15 additional IRO	16	Director of Children's Services	Level

						• posts and 3.5 additional Quality and Review Manager Posts - post inspection. • IRO completion of mid-point checks on case files. • Creation of 12 Advanced Practitioner posts within the Audit Team - post inspection. • Creation of 1 Performance Development Review Officer within the Audit Team post inspection. • SW recruitment has improved. • Senior managers are now working in districts. • Independent Board Chair appointed. • CSC remodelling including new CIN Hubs and PPA teams. • 2 qualified social workers now working in Customer Access Service to ensure appropriate referrals to CSC and timely response to S47 enquiries. 6 out of 9 SW posts appointed to in CART/MASH to undertake 0-10 day Child & Family Assessments. Recruited to additional CSE posts to improve identification, assessment and intervention. Development of the Practice Improvement Model.			
CR6	Failure to comply with statutory requirements and duties relating to children looked after, children in need and children leaving care.	Legal/ Political	LA is legally and possibly financially liable, judicial review. Further OFSTED intervention.	• Corporate legal oversight. • Quarterly safeguarding report. • Serious incident reporting. • Serious case review learning. • Peer review and challenge. • Stronger management oversight in Districts.	25	• Monthly compliance recording of Strategy Meetings and S47 Enquiries. • LSCB have established new QA system including multi-agency case file audits. • Revised Audit Framework launched on 13 May 2016 has strengthened management understanding and quality assurance of practice. • Back to basics SW practice training. Implementation of Risk Sensible Model • Locality Practice Improvement Meetings. • Developed Professional Personal Adviser Teams. • Compliance reporting shows multi-agency Strategy Meetings are taking place in the majority of cases. Improved performance - management reports launched with first line managers. • Leaving Care performance indicators show improvement. • IRO oversight of practice has been strengthened as highlighted in Ofsted Monitoring Visits.	16	Director of Children's Services	Level
CR7	Failure to recruit and retain experienced Social Work staff Failure to recruit and retain Independent Reviewing Officers. Failure to recruit and retain experienced BSO staff.	Organisatio nal	Inability to deliver effective services. High caseloads. Lack of management oversight. Increased staff turnover. Increased agency spend.	• Vacancy monitoring. Recruitment strategy. Quarterly safeguarding report. • Reliance on agency staff risk of high staff turnover and inconsistency of practice. CYP experience frequent changes of IRO. Lack of consistent IRO oversight of Care Plans and CP plans. Impact on the budget - cost of agency staff. • Insufficient BSO support resulting in increased administrative tasks for managers and practitioners.	25	• Additional funding envelope. Enhanced recruiting – vacancies being filled with a high proportion of newly qualified staff. Newton Europe pathway review. Increased focus on retention. • External agency contract to look at CIN cases and work following MASH • Improving SW recruitment is now at the levels within the original funding envelope prior to the £5m and recruitment is continuing. • Specific Recruitment and Retention Strategy for the North of the County.	16	Director of Children's Services	Level

| CR8 | Reputational damage and risk of Direct Intervention by DFE.

Negative media exposure. | Reputational | DFE manages services directly and removes them from the LA. Commission arrangements brought in.

Loss of reputation. Impact on partner agencies. | • Safeguarding and Audit arrangements. Direct management oversight of services.

• Media planning around key issues and Serious Case Reviews. Scrutiny of key reports and information. Communication with Comms Team. | 25 | • Post Improvement Inspection Board with Independent Chair appointed. Post Inspection Improvement Plan. Senior management input into each of the 3 Children Social Care Districts. Review of all CiN cases using internal and external capacity. Social Work Recruitment Strategy. Peer Challenge. Newton Europe review of pathways.

• The council has been issued with an Improvement Notice by DFE which is the lowest level of implementation.

• Communication planning surrounding publication of Serious Case Reviews. Two way communication between LSCB and partner agencies.

• Additional IRO and Advanced Practitioner posts | 16 | Director of Children's Services | Increased IRO capacity (now fully staffed) and Improved systems in place to quality assure practice. |
| CR12 | Failure to implement/maintain systems that produce effective management information

Failure to improve quality of data in Liquid Logic's systems (LCS/LAS)

Operational failure in the main IT Computer Suite (T101) | Organisational | Ineffective collection, collation and input of data Ineffective use of business intelligence, resulting in the inability to identify and respond to changing trends and inform strategic decisions. Impact on strategic planning, understanding and management demand e.g. around demographics and ageing population profile Ineffective reporting arrangements.

Statutory returns will be compromised, so incorrect performance will be reported nationally. OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance. Service planning and management will be severely compromised.

Reliance on uninterrupted operation of T101 cannot be over emphasised. Power up following an uncontrolled failure takes 5 times longer than after a controlled shutdown. Impact on service delivery | • Information management strategy. Data Quality processes. Oracle. Local Information Systems. Corporate performance information. JSNA and other needs assessments

• Weekly provision of information to operational managers. Monthly Performance Books or dashboards provided to Start Well Management Team and Adults Leadership Team. Use of exception reports to flag up data quality issues.

• Over £200k has been invested to improve the back-up services for T101 to improve reliability. However, there are still potential risks regarding A/C cooling, maintenance of UPS units and insurance requirements regarding fire alarm links | 15 | • External support to focus on Children's Services data issues. Introduction of new governance arrangements for children's services. Introduce a new performance management framework that is aligned to draft corporate strategy. Agree performance, financial data and intelligence required for all levels within the County Council. Agree milestones and metrics (ongoing)

• Joint working of Children's Services, Business Intelligence, System Control Team and Programme Office to establish an Accuracy Working Group (relating to Children's services).

• Accuracy Working Group and performance management framework ensuring continued use of management reports within children's social care were established in November 2016. Roll out of a 'Project Accuracy' style approach to YOT, SEND, FARY now underway.

• Developing improvement plan that includes culture and assurance. The plan will include systems such as Controcc and LAS

• Performance sub-group reporting the Improvement Board Chair

• Additional temporary resource employed within Business Intelligence to provide reports for Project Accuracy 2.

• Multimillion pound refurbishment programme including upgrading the electrical infrastructure of county hall complex - to improve the reliability of | 12 | MT | Level |

						the IT Suite. • 'Passport to Independence' reporting work stream incorporating exception reporting. • 'P2P' (Process to Pay) project focussing on procedures and data quality.			
CR16	Management of the County Councils Assets	Organisational	Failure to maintain council owned assets and buildings. Inability to deliver in the timescale required and impact on organisational ability to achieve savings Failure to timely deliver a smaller more affordable property portfolio and associated savings. Inability to deliver service plans and savings effectively within required timescales, risks to service delivery across a number of services. Due to the high profile of Property Strategy (Neighbourhood Centres) delayed delivery could have reputational effect. Legal or public challenges.	• Effective planning and programming method of delivery. Management of organisational transition and effective engagement with operational services • Manage health and safety risks of customers and staff and ensure budgets are managed effectively to maintain assets to a satisfactory standard. • Consider and manage risks associated with redundant properties. Planned maintenance approach. Risk assessments and regular H&S inspections. Presently undertaken by various operational service areas. • Delivery of Property Portfolio Rationalisation Programme (PPRP) is being managed by the programme board. Asset Management Service are working to specific timescales for the public consultation and delivery of recommendations to Cabinet. Office rationalisation is ongoing and is being managed by the PPRP team as a whole. Risks for each part of the project are registered and reviewed by the PPRP team and Board on a regular basis, reporting to Management Team separately. • Communications strategy for property strategy	16	• Asset Management Strategy and accommodation review and planned programme of conditions based work • Short-medium term facilities management strategy defined to deliver the spike in resource demand during the organisational transition period • Cabinet approval sets out the portfolio of buildings to be retained as Neighbourhood Centres. Ongoing work to develop design briefs for retained buildings requiring works and enable continuing community asset transfer of surplus buildings where appropriate. • Communicating with stakeholders to ensure an understanding of the councils financial position and need for change • Communicating specific proposals and service developments in the context of the financial scenario • Libraries – public consultation has taken place to help inform service design and future strategy. The service is liaising closely with asset management, commissioning and estates services to ensure that the process of handover to community organisations who wish to provide an independent community library is as smooth as possible. • The Library service now has a community library manager in post helping to support a number of different organisations to develop their own community library and manage the effective transition of an LCC building to a community library.	12	Head of Asset Management/ Head of facilities Management	Level – risks are significant but currently managed
CR20	Transforming Care (Winterbourne)- the accelerated discharge of the population of adults with a Learning Disability from secure hospital	Economic/ Political/Social	Increased pressure on the adult social care budget. Resettlement from hospital to community health and social care packages shifts the funding responsibility from solely NHS to a shared responsibility between CCG's and LA's to fund these high cost	• There is a governance structure for the Fast Track programme through the Fast Track Steering Group with representation from LCC Director Adult Social Care and Head of Service working alongside SRO's from NHS and CCG's in order to achieve agreement on financial issues including the dowry and any future agreement for a pooled	16	• Improved engagement with procurement colleagues to ensure due process is followed operationally in meeting the needs of this population. • Lancashire's Fast track plan identifies the implementation of a revised model of care for people with LD improving crisis support through multi-disciplinary teams.	12	Director of Adult Services	↑the direction of travel is increased as these are new service users entering the social care system from the NHS, the risk is constant

Ref	Risk	Category	Description	Assurance	Score	Mitigating actions	Score	Owner	Direction
	in-patient beds into community houses		intensive health and social care packages. LCC may not be able to afford these new packages of care in the current financial climate. There is a National Plan to facilitate discharge therefore there is a reputational and political risk in not achieving as Lancashire is identified as a National Fast Track programme for this work due to the high number of Lancashire residents currently in in-patients LD hospitals. The closure of Calderstones hospital is part of this national plan. Failure to agree locally a reasonable figure for a dowry that is planned to follow a person from hospital (NHS) to LA's is a further financial risk.	budget. There are identified work streams each with a defined action plan with leads identified from commissioners across Lancs. Work streams are monitored by the Steering group in addition to oversight by NHS England. The trajectory for possible discharge Sept 15- Mar 19 is to be carefully monitored so appropriate development and procurement of suitable housing and care can be planned for.		• This approach is aimed at reducing admissions and supporting providers to maintain a person's tenure in their chosen house rather than re-enter hospital. • The plan commits to securing improved and alternate care and housing solutions for this population with the aim of creating shared tenancies with back ground support, rather than the current single tenancy model currently used, which will be more cost effective. There are plans to stimulate the provider market to inform innovative solutions to providing for these peoples care and an interim framework has been put in place. • STP budget considerations • The financial risk had been negotiated with the CCG and immediate pressures remain offset whilst negotiations around the pooled budget take place.			from a financial perspective as the cost will be high and require providing for life. (although there are plans to mitigate costs through a dowry system and improved commissioning solutions and the decision taken by Management Team re funding discharges
CR21	Service user/Customer risk associated with the inability to influence demand whilst expectations continue to rise	Reputational/social/economic/political	Demand and expectations continue to rise against a backdrop of reduced resources, thus leading to service failure and an increase in complaints. Failure to integrate health and social care to reduce pressures on demand and expectations as a result of ageing population. Unacceptable waiting times for assessment and reviews including occupational therapy, safeguarding and social care reviews.	• Consultation and engagement with service users and customers. Co-ordination of communications. Changes and impacts communicated to stakeholders. Impact assessments. Alternative delivery options being explored as part of base budget review option development. Learning from complaints and oversight at CCPI.	16	• Alternative delivery options being explored as part of base budget review option development • In relation to adult and children's social care Newton's Europe have been partly been engaged in this area of work • See opportunities entry on Healthy Lancashire • Early help and prevention investment in integrated wellbeing services • Children's demand management strategy • Additional capacity is being secured in key areas such as social work and occupational therapy • Realignment of management capacity in adult social care to provide improved focus on operational priorities • Clear triaging/prioritisation schemes at Customer Access Centre • Work with Newton Europe is underway to improve productivity • Working with health partners to improve arrangements around discharges from hospital • Communicating with stakeholders to ensure an understanding of the councils financial position and need for change • Communicating specific proposals and service developments in the context of the financial scenario	12	MT	↓ Downwards.

| CR24 | Failure to achieve targets agreed with National Troubled Families Unit team due to the specific requirements of the programme.

Failure to provide robust data to evidence the impact on outcomes for those families engaged with the programme | Economic Political | Failure to accrue maximum income from the programme for the authority

Possible reputational risk as a result of failing to meet the national target.

Risk of additional scrutiny of Lancashire's response to the programme | • Robust tracking processes in development with view to maximising payment by result claim opportunities.
• Improvement plan implementation to ensure that 'attached' cases meet national TFU principles with operational staff.
• Ongoing data matching to identify new eligible families
• Data analyst posts have been recruited and are in post. Challenges with compliance of casework with the national TFU principles. | 20 | • Development of reporting processes to ensure monthly progress checks against targets
• Business case to request additional resources to support tracking and claiming processes
• Redesigning of outcomes plan to set more achievable/realistic targets
• Exploration of systems that can be used to undertake the necessary analysis for Lancashire's response to the programme.
• Establishment of multi-agency "engine room" to drive multi-agency partnership working.
• Workforce development ongoing for CAF and LP working.
• Revised CAF documentation, Quality Assurance and processes to assist in meeting requirements. | 16 | Head of Wellbeing, Prevention and Early Help | Upwards |
|---|---|---|---|---|---|---|---|---|
| CR25 | Failure to implement and meet the statutory requirement to children and young people with special educational needs and/or disabilities. | Organisational | Not providing adequate service to SEND leading to inspection failure. Lack of appropriate IT platform. Failure to recruit and retain staff. Commissioning arrangements with health not consistent. | • Self-assessment completed against new framework
• N/W regional peer support group established | 16 | • Implementation of the early help (IT) module.
• Recruitment of qualified staff funded by the SEND reform grant.
• Commissioning arrangements with Health being reviewed. | 12 | Head of Special Education Needs and Disability | Level |
| CR26 | Proposed museum closures | Organisational/political/reputational/financial/legal | The proposal to close five museums has attracted negative publicity nationally, regionally and locally due to the national importance of the sites and collections

Impact on staff leading to sickness absence

The Council could be challenged by Judicial review if the process by which museums are either closed or transferred to a third party cannot be shown to be fair and legally robust | • Weekly meetings between Museums managers and asset management, equality and diversity, communications and business intelligence to proactively manage the process.
• Decisions on process continue to be cleared through legal services and cabinet member as appropriate.
• Expressions of interest have been invited for interested parties that can show they have the resources and expertise to continue operating the museum and ensuring the collections continue to be made accessible to the public. | 16 | • Senior management update staff on a weekly basis
• To help develop a revised cultural offer an application for heritage lottery funding submitted
• Public consultation has taken place to help inform the service design and future strategy of the museum service. Equality Impact Assessments detailing mitigating actions have been undertaken.
• A Cabinet Working Group (CWG) oversees the community asset transfer process to ensure it is fair and robust. The CWG meet on a monthly basis and make recommendations to Cabinet.
• Information has been circulated to assist all staff with issues which may impact upon their health and wellbeing as a result of the proposals to close buildings. | 12 | Head of Libraries, museums, culture & registrars | Level |
| CR27 | The mobilisation of the home care framework and subsequent service transfer process | Organisational/political/reputational/financial/legal | Risk of legal challenge to the tender process

Risk of significant increased costs to the Council

Risk of challenges in the mobilisation and transition | • Staff and County Councillor briefing notes have been shared.
• Steering group established.
• Mobilisation workshop with services who will be required to support the project.
• Evaluation of the implications for services have been identified | 16 | • Transforming Social Care in Lancashire Board to oversee the mobilisation of the home care framework and subsequent service transfer process and that the Home Care Mobilisation Steering Group should report to this Board for decision making.
• Project directly linked to the Passport to | 12 | Director of Adult services | |

			Capacity issues within teams to support the mobilisation and transition to the home care framework and ensuring that the Council's systems are able to support the requirements of the home care framework structure. Challenges relating to providers Potential disruption caused to service users.	through a self-evaluation form completed by each service who will be impacted. • Work has already been undertaken around systems. • Council services who have been engaged have a good understanding of the implications and what needs to be done.		Independence Programme and involve Newton Europe in the development of the mobilisation plan.		
Opportunity Identification Number	Opportunity Description	Opportunity Type	Possible Benefits	Progress to date	Opportunity Score	Maximising Actions	Residual Opportunity Score	Opportunity Owner	Direction of Travel
C01	Establishing a new model for public service delivery in Lancashire	Political	The establishment of a Lancashire Combined Authority and securing a devolution deal with central government. A Combined Authority is an accountable body in its own right – this means it is a single point of decision making on agreed functions (quicker and simpler decisions); has powers delegated to it from Government and the individual local authorities (subject to local discussion and determination); can hold substantial amounts of Government and European funding. In relation to transport, greater co-operation will allow improvements to the region's public transport network.	• Shadow Combined Authority established and meeting monthly, having received endorsement from all participating authorities. Lead Members identified for work streams and regular update reports to the Shadow CA indicate good progress. Discussions around the establishment of a Public Services Board are well developed, to be finalised in Jan / Feb 2017, to enhance engagement with other public sector partners. Initial discussions on a possible devolution deal for Lancashire underway. Successful bid for One Public Estate funding, and Property Board being established.	12	• PWC presented an overview of their proposals for a new public service delivery model to the Combined Authority. • Continue to press government for progress on the issuing of the necessary parliamentary order. Further develop the devolution ask, whilst ensuring that this does not interfere with the establishment of the Combined Authority itself. • Continue to engage with councillors within individual member authorities to ensure understanding and support for the proposals, identifying benefits already gained (eg OPE, better relationships, links to LEP and growth Deal outcomes). • Leader's workshop and separate Chief Execs workshop took place in January 2017 to take stock and consider the necessary next steps.	16	Chief Executive	↑ Upwards
CO2	Delivering economic growth	Economic	Continued successful delivery of the LEP's current strategic economic growth programmes. Successfully secured new resources for Lancashire to support job and business creation, housing growth and the delivery of strategic transport	• Lancashire Enterprise Partnership has secured almost £1 billion of national resources to deliver a transformational programme of economic growth which see the delivery of new jobs, business and housing growth and strategic transport infrastructure. Key programmes/projects secured include the Preston, South Ribble	12	• Work with local authority partners on the establishment of a Combined Authority for Lancashire and in securing a Devolution Deal with Government to ensure national resources to support economic growth and regeneration are secured. • Maximise the support from key local and national public and private sector stakeholders outside of the County Council.	16	Director of Economic Development	↑ Upwards

				infrastructure linking to drive economic growth and regeneration, linking residents and businesses with economic opportunities.	and Lancashire City Deal, Growth Deal, three Enterprise Zones, Growing Places Funding, Boost Business Lancashire and Superfast Broadband.		• EDRF project 'Boost' has secured grant funding agreement until end of 2018 • Growth Deal settlement circa £70m will provide resource for six key projects over the next three years.		
CO3	Opportunities through delivering the draft corporate strategy and property strategy	Economic/Social	This strategy seeks to ensure we continue to meet the immediate needs of our communities while shaping the council into an organisation that is sustainable and able to deliver successfully against its goals for years to come. It sets out what we will be doing to achieve that balance, along with our commitment to securing the best outcome for our citizens, communities and for Lancashire. The strategy will help to ensure that we deliver on the following strategic outcomes: - To live a healthy life - To live in a decent home in a good environment - To have employment that provides an income that allows full participation in society	• A draft Corporate Strategy, has been produced and has been subject to Consultation. Cabinet considered the Strategy document and the approach contained within it at its meeting of the 26 November 2015. The Strategy was submitted to full Council on the 17 December 2015. The Strategy was debated and amendments agreed. It was resolved that the Corporate Strategy, as now amended, be approved subject to the section 'Our approach to service delivery' being referred back to Cabinet for further consideration. That review process is ongoing	12	• Use the strategy and associated evidence base to guide our decision making and as the overarching framework for planning interventions which will meet the needs of communities • Digital by design • Embedding evidence based policy/decision making to plan for the future • Aligning with health to meet need	16	MT	↑ Upwards
CO4	Health and Social Care Integration	Organisational	The principle of the separate organisations working together to align plans, strategies and budgets will involve the development of new delivery models and ways of working, to avoid duplication and focus activity where it is needed, recognising that current models of service delivery are unsustainable. Integration would provide the best opportunity to minimise the impact of funding reductions as well as providing a better offer for service users	Participation in the Healthier Lancashire programme building upon the "Alignment of the Plans" work undertaken Sustainability and Transformation Plan (STP). • Influencing and shaping the process to take account of Combined Authority objectives if and where appropriate. • Aligning, where appropriate with existing work at a pan Lancashire level, and within individual health economies. • Consideration of new models of delivery and potential new funding arrangements, such as pooled budgets where appropriate.	12	• Recognise the need for: an ambitious vision, robust partnerships, clear and credible delivery plans, and strong leadership and governance arrangements at a pan-Lancashire level. • Lead the integration agenda, recognising the need for an ambitious vision, robust partnerships, clear and credible delivery plans. Strong leadership and governance arrangements at a pan-Lancashire level. • PWC interim draft report 'Lancashire Public Service Delivery Model' presented to Political Governance Working Group and then full Council on 23rd February to allow time for reflection. The Political Governance Working Group will undertake a detailed review of the report after the elections.	16	MT	Level

Key to Scores

	CATASTROPHIC (for risk) OUTSTANDING (for opportunity)	5	10	15	20	25
	MAJOR	4	8	12	16	20
	MODERATE	3	6	9	12	15
IMPACT	MINOR	2	4	6	8	10
	INSIGNIFICANT	1	2	3	4	5
		RARE	UNLIKELY	POSSIBLE	LIKELY	CERTAIN
			LIKELIHOOD			

Cabinet Committee on Performance Improvement
Meeting to be held on Tuesday, 7 March 2017, 9.00am

Report of the Chief Executive

Part I

Electoral Division affected: All

Quarterly Corporate Performance Monitoring Report – Quarter 3 2016/17
(Appendix 'A' and 'B' refer)

Contact for further information:
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Executive Summary

Regular corporate monitoring of performance across the authority as a whole includes the production of quarterly reports and analysis of corporate performance.

Quarterly Quality of Service reports against the themes of Start Well, Live Well and Age Well, along with Highlight Reports for Development & Corporate Services and Commissioning, Governance, Finance & Public Services have been produced for quarter three 2016/17, giving details of performance across the organisation.

This Corporate Performance Monitoring Report is derived from the in-depth monitoring reports and provides an overview of performance activity across the Council.

An overview of the Quarter 3 budget position is also provided at Appendix 'A' so performance can be viewed within the associated financial context.

In addition as part of this quarterly Corporate Performance Monitoring report, a latest post (safeguarding) Children's Service Ofsted inspection update has been attached at Appendix 'B' and updates will continue to feature in these reports going forward.

Recommendation

CCPI is asked to comment on the reported performance for Quarter 3 and the Ofsted post inspection update information provided.

Lancashire
County Council

Background and Advice

Regular corporate monitoring of performance across the authority as a whole includes the production of quarterly reports and analysis of corporate performance. Quarterly Quality of Service reports against the themes of Start Well, Live Well and Age Well have been produced for quarter three 2016/17, giving an overview of performance against agreed headings and parameters.

In addition Highlight reports have been produced for Development & Corporate Services and Commissioning, Governance, Finance & Public Services.

In addition to monitoring and providing progress updates against budgets, projects and other future developments, each Quality of Service and Highlight report gives details of performance against key indicators for that quarter.

Monitoring across these Quarter 3 (Q3) indicators has been used to provide this report.

Performance Summary

Start Well

- The proportion of children looked after (aged 5-17) with a Personal Education Plan (PEPs) has fallen during Q3 to 72% at the end of December. The number of children with a PEP recorded on the system does demonstrate an increasing trajectory over the last 12 months (53% in January 2016).

  A recovery is underway to ensure more timely and up to date PEPs are recorded on the system, with a manual check of each missing PEP being undertaken by the case support team. Themes emerging from the manual checks illustrate that there are a number of PEPs recorded in case notes and on other systems such as Documentum. These are now being recorded in the correct format to ensure compliance and to increase performance. Furthermore, social workers are being chased for missing PEPs, with Heads of Service briefed on the levels of missing PEPs on a monthly basis.

- The timeliness of strategy discussions completed in 24 hours at the end of December 2016 was 59%. The figure had reduced for the third consecutive month and was significantly lower in several areas of the county.

  A detailed analysis has been completed in respect of the timeliness of all Strategy Discussions held in December 2016. The report and learning has been shared with CSC Heads of Service and Senior Managers with the issue also discussed at CSC weekly management meetings. The report recommendations are being taken forward including by better evidencing and recording of decisions to undertake strategy discussions along with explanations of delays.

- There were further improvements amongst care leaver indicators; care leavers in education, employment and training (EET) (50.7% - up from 48.2% in quarter 2), suitable accommodation (89.2% - up from 87.3% in quarter 2)

and care leavers contacted in the last three months (94.0% - up from 91.7% in quarter 2).

- The proportion of experienced social workers (32.3%) had increased to the highest proportion seen for this indicator since May 2016 (32.7%).

- So far in 2016/17, adopted children (55 children from April to Dec 2016) have waited 504 days on average from entering care to the date of placement, with 250 days from placement order to matching date. This is an improvement on the 2015/16 full year position of 571 days and 259 days respectively.

- Provisional data released by Ofsted for December 2016 shows that there was two primary and two secondary schools judged as Inadequate, however the number of primary schools judged as Good or Outstanding improved to 95.8%. The secondary school figure remained the same at 79.5%.

Ofsted management information over the period from 2011 to 2016 shows a strong, steady improvement in the proportion of schools judged Good or Outstanding at inspection when compared to our 10 statistical neighbour local authorities for both primary schools (from 6th ranking to 1st ranking) and secondary schools (from 6th ranking to 2nd ranking).

- The latest published data from the Ministry of Justice shows there was an increase in first time entrants to the youth justice system within Lancashire. The rate had increased to 309.0 per 100,000 population (approx. 350 entrants) between July 2015 and June 2016 but remained lower than the national (392.0) and regional (369.0) rates. In fact Lancashire is now positioned in the upper quartile nationally for this indicator. The reoffending and use of custody rates remained stable.

Live Well

Community Services

- Highways set a target of repairing all actionable carriageway and footway defects within 20 working days. In quarter 3 2016/17, Highways achieved 98% compared to 99% in the previous quarter. The quarter 3 percentage figure for 2015/16 was also 99%.

- Overall, quarter 3 performance for all street lighting faults (4.65 days - which is made up of 2.32 days for those excluding traffic management and 11.4 days for those including traffic management) is similar compared to quarter 2 2016/17 (4.41 days) and is within the 5 day average repair time target.

- The diversion of municipal waste away from landfill by recovery, recycling, reuse and composting is forecast to be 49% with landfill of 51% for 2016/17. This is a drop in the forecasted performance from 56% diversion in quarter 1 and 50% in quarter 2 2016/17. This reduction in performance is mostly as a result of reduced waste processing activities at the waste recovery parks, exacerbated by increased landfilling of waste whilst operational changes are

implemented as part of the company transformation. Increased residual waste arisings will also impact on performance.

- The number of visits to Libraries in quarter 3 2016/17 was 895,416 and is down on quarter 2 (by 174,336). The number of Library E-Book loans (downloads) has gone up again from being 25,416 in quarter 3 of 2015/16 to 40,516 in quarter 3 of 2016/17 with a slight increase from quarter 2 of 2016/17 (40,020). A number of the totals seem low as they reflect library closures during the quarter on top of the usual seasonal variations.

Public Health

- The most up to date and complete killed or seriously injured (KSI) statistics are those to the end of September 2016. There has been a reduction in the number of both KSI and Slight casualties in the first nine months of 2016 compared to 2015 (53 against 75 KSI and 267 against 285 Slight). The Road Safety team also reported provisional data on the number of fatalities between 1 January 2016 and 31 December 2016. There were 36 collisions which resulted in 38 fatalities during 2016. Two collisions resulted in 2 fatalities.

- NEET (Not in Education, Training or Employment) performance for 16-17 year olds (new reporting cohort), the nationally reported 3 month average for November 2016 to January 2017 is at the targeted level for Lancashire as a whole at 3.1% (817 16-17 year olds) with some fluctuations across districts. The 2016-17 Not Known 3 month average performance is 1.5 percentage points above target (6.5% against the target of 5%) but month on month, there have been significant improvements after the 'follow up' activity undertaken by the team (for January 2017, the figure was 5.2%). The combined (NEET & Not Known) 3 month average is currently 9.6% which is 1.5 percentage points above the target of 8.1%. This is highest in Burnley and Rossendale (13.9% and 12.8% respectively) primarily due to the high Not Known figures in these areas.

- Over the long term of the 5 year programme (2013/14 – 2017/18), there have been steady increases in the number of NHS health checks completed, with 12,329 completed in quarter 3 of 2016/17 (70.4% of the 17,511 offered). The cumulative percentage since 2013/14 is 56.9% of health checks completed (131,000 completed of the 230,076 appointments offered) against a local performance target of 60%. Currently 67.7% of the eligible population of 340,076 have been offered a health check which is slightly down on the target of having offered all the eligible population a health check by the end of 2017/18.

- The number of successful completions of drug treatment for Opiate use latest figure reported of 10.6% (for the year to the end of November 16) continues the positive performance trend (8.4% in 2013 to 10.7% in 2014). This is greater than the England benchmark of 6.6%.

Age Well

- The proportion of people with personal budgets (also known as 'self-directed support') is still below the national average, but this percentage is improving steadily as expected through targeted reviews as part of the recalibration of the 'Resource Allocation Scoring' (RAS) project. Many who are currently on a managed budget are being moved to a personal budget instead. The quarter 3 personal budgets performance figure of 72.7% shows a steady improvement from the quarter 2 figure of 66.9%. As a result of the RAS project, it is still on a trajectory to achieve 84% which would be in line with our comparator authorities and the national average.

- 888 people aged 65+ were discharged from hospital between July and September 2016. An increase of 22% on the previous quarter (727). 83.4% were still at home 91 days later which compares favourably with the 2015/16 national average of 82.7% and with the suggested Lancashire 2016/17 Better Care Fund target of 82.0% (820 still at home out of 1000).

Work in East Lancashire's newly established Reablement team commenced in November after a period of training. An Occupational Therapist leads the team, and full training has been provided to social care support officers and to reablement assistants (employed by an external home care provider). The outcomes for people using the service have been improved, with only 20% of people requiring long term home care at the end of a period of reablement, and the time taken to reable people being reduced by over 25 hours, enabling more people to use the service. This model of delivery will be rolled out to North and Central Lancashire from March 2017.

- Q3 Delayed Transfers of Care (DToC) indicators are derived from the latest figures published by NHS Digital, which includes data up to the end of December 2016. Quarter 3 Lancashire figures show steadily increasing trends for delays attributable to all causes and those attributable to social care. Delays attributable to all causes have risen from 13.5 (per 100,000 of the population aged over 18 years) in quarter 2 of 2016/17 to 14.9 (equivalent of 141 people) in quarter 3 and this is now considerably higher than the latest England average of 12.1. Delays attributable to social care have risen from 4.0 in quarter 2 of 2016/17 to 4.5 (equivalent of from 38 to 43 people) in quarter 3, but this is still lower than the latest England average of 4.7.

LCC and Newton Europe have now conducted studies across all of the major Hospitals in Lancashire (except Southport & Ormskirk which is booked in early March) to get an in-depth understanding as to the cause of DTOC in each of the Hospitals. The biggest causes of DTOC across the county are:
   o awaiting a continuing health care multi-disciplinary team meeting (Health)
   o awaiting an assessment (Health & Social Care mix)
   o awaiting a particular type of care (anything from residential to reablement)

The "Passport to Independence" programme will play a significant role in reducing delays due to 2 and 3. The other actions agreed are specific to each area, but show a positive step towards reducing DTOC

Highlight Reports – Quarter 3 performance

- By the end of quarter 3, 6 Rosebud loans totalling £1.1m and 6 Micro Rosebud loans totalling £202,000 had been invested, against a target of £1.6m for 2016/17.

- The Estates team had achieved £7.4m of capital receipts and the rental income on the commercial property portfolio was £2.6m against annual targets of £5.0m and £3.46m respectively.

- Total Superfast Broadband (SFB) coverage in the Lancashire Enterprise Partnership (LEP) Area is 97% and 96% for the LCC area. This is higher than the percentages for the United Kingdom and England which are 92.5% and 93%

- At the end of quarter 3, 147 newly qualified social workers were being supported in their Assessed and Supported Year of Employment (ASYE) within Adult and Children's services, with a further 59 social work students also on placement.

- The Employment and Support Team are currently supporting 91 Children Looked After/Leaving care young people.

- Care debt over 6 months is running at a level just above £11.4m. This is an increase of £1m over the previous quarter and in the main, is due to an atypical bump in billing 6 months ago resulting from a catch up billing exercise which generated an additional £600k of arrears billing.

- Corporate debt levels are less of an issue than care debt although recovery work continues unabated. NHS joint funded packages also continue to be an important facet of this debt equation with resource being dedicated to billing smarter to avoid unnecessary debt build up. LCC payments experienced a boost in performance in September across the board due to the return to normal working following the schools holiday break.

Consultations

Members of Management Team(s) have previously received the information in this report.

Implications:

This item has the following implications, as indicated:

Risk management

No significant risks have been identified in relation to the proposals contained within this report.

Local Government (Access to Information) Act 1985

List of Background Papers

Paper	Date	Contact/Directorate/Tel
Report to the Cabinet Committee on Performance Improvement – Quarterly Corporate Performance - Quarter 1 2016/17 Report	5 December 2016	Michael Walder, Business Intelligence Team, 01772 533637
Report to the Cabinet Committee on Performance Improvement – Quarterly Corporate Performance - Quarter 1 2016/17 Report	25 October 2016	Michael Walder, Business Intelligence Team, 01772 533637

Appendix A

Financial Summary

The table below gives the County Council's financial position for 2016/17 as of the end of Quarter 3.

Ref	Service Grouping	Approved Budget	Current Period Forecast Outturn	Current Period Forecast Variance	Q2 Cabinet Forecast Variance	Current Period Forecast Variance
		£m	£m	£m	£m	%
3.1	ADULTS SERVICES	317.674	319.528	1.854	3.848	1%
3.2	CHILDRENS SERVICES	119.421	132.729	13.308	10.981	11%
3.3	COMMUNITY SERVICES	134.239	137.044	2.805	4.085	2%
3.4	PUBLIC HEALTH & WELLBEING	28.860	28.867	0.007	1.907	0%
3.5	DEVELOPMENT AND CORPORATE SERVICES	35.574	35.408	-0.166	0.199	2%
3.6	COMMISSIONING	46.649	44.556	-2.093	-0.835	-3%
3.7	CHIEF EXECUTIVE	30.603	-0.410	-31.013	-33.456	-97%
	TOTAL	713.020	697.722	-15.298	-13.271	-2%

The current forecast outturn for the County Council is an under spend of £15.298m and represents a variance of c. 2% against the overall County Council budget. This is subject to a number of assumptions around the anticipated profile of expenditure for the rest of the year which is difficult to predict in some demand led budget areas.

* Please note that this forecast is predominantly based on the information up to the end of November 2016 with adjustments made to reflect further information available in December (this is usual practice for Quarter 3 reports due to Cabinet deadlines). The report also contains a comparison to the previously reported financial position as at 30 September 2016.

Appendix B

Ofsted Post Inspection Update

Background and Advice
Ofsted carried out an unannounced inspection of Children's Services which commenced on 14 September 2015 and which lasted for four weeks.
The inspection focused on the experiences and progress of children in need of help and protection, children looked after and care leavers. It also included looking at the effectiveness of our services and arrangements to help these children, including adoption and fostering. Ofsted also carried out a review of the effectiveness of the Lancashire Safeguarding Children Board (LCSB) at the same time.
Ofsted published its report on Friday 27 November 2015 rating the overall effectiveness of the Children's Services as inadequate. The judgement for the LSCB was good.

Actions taken since the last CCPI
A number of actions have been put in place and developed since the last report to CCPI on the 5th December 2016:

Recruitment drive - increasing capacity and, in turn, reducing caseloads in social work teams is a vital part of solving the challenges identified during the Ofsted inspection. However children's social care is a challenging area to recruit to, not only in Lancashire but also across many parts of the country. To address this a recruitment campaign has been ongoing since the summer 2016 and has been successful in recruiting to various roles in children's services. To date more than 188 permanent posts have been recruited to including social workers, team managers and independent reviewing officers.

A particular focus at the moment is on the north of county (Fylde, Wyre and Lancaster) because there have been specific difficulties in recruiting and retaining experienced social workers in this areas. A north Lancashire Recruitment and Retention Strategy has been developed and will focus on the following five areas:

- Staff flexibility and mobility – using staff flexibly across teams to ensure the best balance of skills and experience at any one time whilst maintaining stability for children and families.
- Establish a clear offer – identify and communicate what is being offered to staff (future and existing), what can they expect working for Lancashire County Council and what does this look like in North Lancashire.
- Targeted recruitment – being very clear about the roles we are trying to fill and the expectations of these roles and the innovative, creative and collaborative approaches needed to recruit to these roles
- Retention of staff – the support that staff receive, the environment that staff work in, the opportunities for development and progression.
- Grow your own – making sure we identify the potential in all our staff and put in place the necessary support to realise this potential, spotting talent early and planning the make-up of the future workforce.

Service developments – the Practice Improvement Model is an intensive piece of work that will focus on improving practice across social work teams, initially in the Fylde and Wyre area. The intention is to work alongside staff to support, challenge and innovate and to test out new ways of working that improve outcomes for children. There is a detailed action plan that provides the framework for this project and this will be delivered by April 2017 and the learning and new ways of working that have been developed and implemented will be rolled out across all social care teams in Lancashire. The four main areas of focus for the practice Improvement Model are:

- Embedding quality practice
- Management and staffing
- Strengthening locality working
- Working in partnership

Risk sensible – the risk sensible model continues to be implemented and over 250 staff have now been trained. Plans are now also in place to train staff in the Wellbeing, Prevention and Early Help service and partner organisations are also interested in understanding and practicing in line with the risk sensible approach and funding has been agreed by the LSCB to facilitate this.

Framework agreement – Skylakes are no longer taking on new work and assessments on behalf of children's social care and will have handed back all existing work by mid February. Robust plans are place to ensure that the increased work coming into social care as Skylakes step back is effectively managed.

Director of children's services role – Amanda Hatton has been appointed as the permanent Director of Children's Services took up her role on the 15 February 2017. To ensure a seamless transition of leadership Linda Clegg will continue to work alongside Amanda until the end of March and beyond this will be working in Lancashire for a day a week to support the ongoing improvement journey.

Ofsted quarterly monitoring inspection - during their most recent visit in January, inspectors spent two days in the county assessing the progress the council, with its partners, is making in relation to children in need cases and those subject to child protection plans.

In a letter published on the Ofsted website, inspectors recognise that the local authority continues to build on the improvements seen at the last visit and they also saw positive outcomes for some children due to the local authority's intervention. The full letter which details the findings from the monitoring inspection was published on the 10th February and can be found [here](#).

DCS briefings – over 400 staff across children's services participated in the second round of staff briefings led by Linda Clegg. The purpose of these staff briefings is to ensure the workforce is fully aware and able to inform improvement and so that Linda can share and discuss the key priorities moving forwards. The evaluation feedback from these briefings has been extremely positive and 95% reported a better understanding about the progress in delivering the improvement plan and 96% had a better understanding of our current and future priorities.

12 week improvement plan – the new 12 week improvement plan was agreed by the Improvement Board on 8 February 2017 and covers the period from February to April 2017. This approach enables a clear focus on some very short term priorities that support the overall delivery of the Improvement Plan. This 12 week plan will focus on the following areas and will strengthen the links between the Improvement Board, the Lancashire Safeguarding Children Board and the Children and Young People's Trust Board:

- Child in Need
- MASH/CART redesign
- Practice Improvement Model
- Workforce
- Ofsted monitoring inspection response
- Multi agency early help

Project Accuracy – After two waves of project activity since April 2016, significant improvement to the accuracy of information in the LCS system has been achieved. In January, all of the metrics under review were measured by Practice Managers at 90% accurate or above.

There has been an effective project handover from Newton Europe to the County's Programme Office and the process of handing over to Children's Services is well underway. A fortnightly 'Accuracy Working Group' is established to oversee the maintenance of data quality and reporting for children's social care. The Performance Management Framework was presented to Children's Social Care Practice Managers in November and is now fully implemented. Weekly and monthly reports are made available regularly and are being used to manage performance in teams which is a significant change to previous reliance on local record keeping to maintain an overview of service operations.

The next phase of Project Accuracy covers youth offending teams, SEND, residential, fostering and adoption.   It includes reviewing the accuracy of information across the range of services, and requires the development of new reports or quality reviewing existing reports. This phase is being managed by the new processes within the business with new capacity being brought in through the appointment of a new Practice Improvement Officer from the end of February.